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ronica Doucet (Depositor's name) (Signature) April 24, 2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/749,783	12/30/2003	Joshua D. Rabinowitz	00021.06CON	1083

TITLE OF INVENTION: DELIVERY OF DRUG ESTERS THROUGH AN INHALATION ROUTE

APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
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EXAMINER		ART UNIT		CLASS-SUBCLASS			
HAGHIGHATIAN, MINA		1616		424-045000			
CFR 1.363).  Change of correspon Address form PTO/SB/I  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME ANI	dence address or indication of "Fordence address (or Change of 22) attached.  Attached.  Attached.  The Address' Indicator more recent) attached. Use DRESIDENCE DATA TO Best an assignce is identified ben 37 CFR 3.11. Completion of	Correspondence tion form of a Customer	(1) the na or agents (2) the na registered 2 registered listed, no	nting on the patent front page, I mes of up to 3 registered pate OR, alternatively, me of a single firm (having as attorney or agent) and the nared patent attorneys or agents. It name will be printed.  F (print or type)  The patent of the patent of the patent of the patent. If an assignment.	a member a consider the second of the second	iam L. Leschensky Locument has been filed for	
(A) NAME OF ASSIGN	<sub>IEE</sub> . Pharmaceutica	•	) RESIDENC	CE: (CITY and STATE OR CO Ralo Alto,			
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Authorized Signature  Typed or printed name	J.Th.	M	-f	Date	4/2 <i>4/0-C</i>		
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